MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.	FILING DATE
APPLICANT(S) **10/522307**	

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT				AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.			IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/							51						
2	/							52						
3		/						53						
4		/						54						
5		/						55						
6		/						56						
7		/						57						
8		/						58						
9		/						59						
10		/						60						
11		/						61						
12		/						62						
13		/						63						
14		/						64						
15		/						65						
16	/							66						
17	/							67						
18	/							68						
19	/							69						
20		/						70						
21		/						71						
22		/						72						
23		/						73						
24		/						74						
25		/						75						
26		/						76						
27		/						77						
28		/						78						
29		/						79						
30		/						80						
31		/						81						
32		/						82						
33		/						83						
34		/						84						
35		/						85						
36	/							86						
37	/							87						
38								88						
39								89						
40								90						
41								91						
42								92						
43								93						
44								94						
45								95						
46								96						
47								97						
48								98						
49								99						
50								100						
TOTAL IND.	8	↓		↓		↓		TOTAL IND.		↓		↓		↓
TOTAL DEP.	29	←		←		←		TOTAL DEP.		←		←		←
TOTAL CLAIMS	37							TOTAL CLAIMS						

PTO - 1360 (REV. 11/04)